

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/1600,400</u>	Examiner : <u>Poon</u>	GAU : <u>3643</u>
From: <u>J. Robbins</u>	Location: <u>(IDC) FMF FDC</u>	Date: <u>12-13-04</u>

Tracking #: epM10600400 Week Date: _____

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please verify the 2nd amendment
for claim 37 per examiner's amendment - NOA 11-5-04.

Thank You
[Signature]

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
 REV 10/04